Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                      |   |                  |                      |                               |                  |              | SMALL ENTITY TYPE |                        |          | OTHER THAN<br>OR SMALL ENTITY                    |                        |  |
|--|----------------------|---|------------------|----------------------|-------------------------------|------------------|--------------|-------------------|------------------------|----------|--|------------------------|--|
| TOTAL CLAIMS   |                      |   |                  |                      |                               |                  | RA           | ΓE                | FEE                    | 1        | RATE   | FEE                    |  |
| FOR  |                      |   | NUMBER FILED     |                      | NUMBER EXTRA                  |                  | BASIC        | FEE               | 370.00                 | OR       | BASIC FEE  | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |                      |   | Jaminus 20=      |                      | * 36                          |                  | X\$          | 9=                |                        | OR       | X\$18=   | (C) 8                  |  |
| INDEPENDENT CLAIMS   |                      |   | 3 minus 3 =      |                      | * 2                           |                  | X4           | 2=                |                        | OR       | X84=   | 1108                   |  |
| MU   | LTIPLE DEPENI        | DENT CLAIM PE                               | RESENT           |                      |                               |                  |              |                   |                        |          | +280=  |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |                      |   |                  |                      |                               |                  | +14          |                   |                        | OR       |  |                        |  |
|  |                      |   |                  |                      |                               |                  | TO           | AL                |                        | OR       | TOTAL OTHER                                      | THAN                   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |                      |   |                  |                      |                               |                  | SMALL ENTITY |                   |                        | OR       | SMALL  |                        |  |
| AMENDMENT A  |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | HIGH<br>NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA | RA           | ΤE                | ADDI-<br>TIONAL<br>FEE |          | RATE   | ADDI-<br>TIONAL<br>FEE |  |
|  | Total                | *   | Minus            | **                   |                               | =                | X\$          | 9=                |                        | OR       | X\$18=   |                        |  |
|  | Independent          | *   | Minus            | ***                  |                               | =                | X4           | 2=                |                        | OR       | X84=   |                        |  |
|  | FIRST PRESE          | NTATION OF MU                               | JLTIPLE DEI      | PENDEN               | T CLAIM                       |                  | +14          | n-                |                        | OR       | +280=  |                        |  |
|  |                      |   |                  |                      |                               |                  |              | OTAL              |                        | OR       | TOTAL  |                        |  |
| (Column 1) (Column 2) (Column 3)   |                      |   |                  |                      |                               |                  |              | . FEE             |                        | JON      | ADDIT. FEE                                       |                        |  |
| AMENDMENT B  |                      | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                  | HIG<br>NUM<br>PREV   | HEST<br>MBER<br>IOUSLY<br>FOR | PRESENT<br>EXTRA | RA           | TE                | ADDI-<br>TIONAL<br>FEE |          | RATE   | ADDI-<br>TIONAL<br>FEE |  |
|  | Total                | *   | Minus            | **                   |                               | =                | X\$          | 9=                |                        | OR       | X\$18=   |                        |  |
|  | Independent          | *   | Minus            | ***                  |                               | =                | X4           | 2=                |                        | OR       | X84=   |                        |  |
| L  | FIRST PRESE          | NTATION OF MI                               | JUTIPLE DE       | PENDEN               | T CLAIM                       |                  |              | <br>10=           |                        | 1        | +280=  |                        |  |
|  |                      |   |                  |                      |                               |                  |              | OTAL              |                        | OR<br>OR | TOTAL  |                        |  |
|  |                      | G   |                  | i                    | -                             | (O. ) O.         | ADDIT        | FEE               | L                      | Jon      | ADDIT. FEE                                       |                        |  |
| AMENDMENT C  |                      | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                  | HIG<br>NUI<br>PREV   | JMN 2) HEST MBER HOUSLY D FOR | PRESENT<br>EXTRA | RA           | TE                | ADDI-<br>TIONAL<br>FEE |          | RATE   | ADDI-<br>TIONAL<br>FEE |  |
|  | Total                | *   | Minus            | **                   |                               | =                | X\$          | 9=                |                        | OR       | X\$18=   |                        |  |
|  | Independent          | *   | Minus            | ***                  |                               | =                | I X          | 2=                |                        | OR       | V04  |                        |  |
|  | FIRST PRESE          | ULTIPLE DE                                  | JLTIPLE DEPENDEN |                      | IT CLAIM                      |                  |              |                   | 1                      |          | <del>                                     </del> |                        |  |
|  | If the entry in colu | mn 1 is less than t                         | he entry in co   | lumn 2 wr            | ite "0" in c                  | olumn 3.         |              | 10=               |                        | OR       | L  |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                      |   |                  |                      |                               |                  |              |                   |                        |          |  |                        |  |